

Fill in this information to identify the case:

Debtor name Cell-nique Corporation

United States Bankruptcy Court for the: _____ District of _____ (State)

Case number (if known): _____

☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets — Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
☒ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

2. Cash on hand

\$ 26,100

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm) Type of account Last 4 digits of account number

3.1 Berkshire Bank Check Many \$ 26,0003.2 Wells Fargo Check 3193 \$ 100**4. Other cash equivalents (Identify all)**

4.1 \$

4.2 \$

5. Total of Part 1

\$ 26,100

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

Part 2: Deposits and prepayments**6. Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.
☒ Yes. Fill in the information below.

Current value of debtor's interest

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

7.1 National Grid \$ 5,450

7.2 \$

Debtor Cell-nique Corporation Document Page 2 of 33 Case number (if known)**8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

8.1 \$

8.2 \$

9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

\$

Part 3: Accounts receivable**10. Does the debtor have any accounts receivable?**☐ No. Go to Part 4.☒ Yes. Fill in the information below.Current value of debtor's
Interest**11. Accounts receivable**11a. 90 days old or less: 188,227 - 17,346 = → \$ 170,881
face amount doubtful or uncollectible accounts11b. Over 90 days old: 67,885 - 67,885 = → \$ 0
face amount doubtful or uncollectible accounts**12. Total of Part 3**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$ 170,881**Part 4: Investments****13. Does the debtor own any investments?**☒ No. Go to Part 5.☐ Yes. Fill in the information below.Valuation method
used for current valueCurrent value of debtor's
Interest**14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

14.1 \$

14.2 \$

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity:

% of ownership:

15.1 \$

15.2 \$

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

16.1 \$

16.2 \$

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$

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Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

☐ No. Go to Part 6.☒ Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials	06/30/2023 MM / DD / YYYY	\$ 669,257	669,257	\$ 669,257
20. Work in progress	06/30/2023 MM / DD / YYYY	\$ 7,261	7,261	\$ 7,261
21. Finished goods, including goods held for resale	06/30/2023 MM / DD / YYYY	\$ 430,704	430,704	\$ 430,704
22. Other inventory or supplies	MM / DD / YYYY	\$		\$
23. Total of Part 5				\$ 1,107,222

Add lines 19 through 22. Copy the total to line 84.

24. Is any of the property listed in Part 5 perishable?

☐ No☒ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

☐ No☐ Yes. Book value Valuation method Current value

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

☒ No☐ Yes**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

☒ No. Go to Part 7.☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops—either planted or harvested	\$		\$
29. Farm animals Examples: Livestock, poultry, farm-raised fish	\$		\$
30. Farm machinery and equipment (Other than titled motor vehicles)	\$		\$
31. Farm and fishing supplies, chemicals, and feed	\$		\$
32. Other farming and fishing-related property not already listed in Part 6	\$		\$

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33. Total of Part 6.

Add lines 28 through 32. Copy the total to line 85.

\$

34. Is the debtor a member of an agricultural cooperative?☐ No☐ Yes. Is any of the debtor's property stored at the cooperative?☐ No☐ Yes**35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?**☐ No☐ Yes. Book value \$ Valuation method Current value \$**36. Is a depreciation schedule available for any of the property listed in Part 6?**☐ No☐ Yes**37. Has any of the property listed in Part 6 been appraised by a professional within the last year?**☐ No☐ Yes**Part 7: Office furniture, fixtures, and equipment; and collectibles****38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**☐ No. Go to Part 8.☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture			
Fully Depreciated Book Value	\$ 0	15,000	\$ 15,000
40. Office fixtures			
	\$		\$
41. Office equipment, including all computer equipment and communication systems equipment and software			
	\$ 3,167	3,167	\$ 3,167
42. Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
42.1	\$		\$
42.2	\$		\$
42.3	\$		\$

43. Total of Part 7.

Add lines 39 through 42. Copy the total to line 86.

\$ 18,167

44. Is a depreciation schedule available for any of the property listed in Part 7?☐ No☒ Yes**45. Has any of the property listed in Part 7 been appraised by a professional within the last year?**☒ No☐ Yes

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Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.
- ☒ Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1 Chevy Van	\$ 0	5,000	\$ 5,000
47.2 Freightliner and Trailers	\$ 29,381	40,000	\$ 40,000
47.3	\$		\$
47.4	\$		\$
48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels.			
48.1	\$		\$
48.2	\$		\$
49. Aircraft and accessories			
49.1	\$		\$
49.2	\$		\$
50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)			
Mfg Production Equipment	\$ 1,695,826	1,695,826	\$ 1,695,826
51. Total of Part 8. Add lines 47 through 50. Copy the total to line 87.			\$ 1,740,826

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☐ No
- ☒ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☐ No
- ☒ Yes

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Part 9: Real property

54. Does the debtor own or lease any real property?

☐ No. Go to Part 10.☒ Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property <small>Include street address or other description such as Assessor's Parcel Number (APN) and type of property (for example, acreage, factory, warehouse, apartment, or office building), if available.</small>	Nature and extent of debtor's interest in property	Net book value of debtor's interest <small>(Where available)</small>	Valuation method used for current value	Current value of debtor's interest
55.1 22 Hamilton Way, Castleton, NY	Lease	\$ 823,923	100,000	\$ 100,000
55.2		\$		\$
55.3		\$		\$
55.4		\$		\$
55.5		\$		\$
55.6		\$		\$

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$ 100,000

57. Is a depreciation schedule available for any of the property listed in Part 9?

☐ No☒ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

☒ No☐ Yes**Part 10: Intangibles and intellectual property**

59. Does the debtor have any interests in intangibles or intellectual property?

☐ No. Go to Part 11.☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest <small>(Where available)</small>	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets	\$ 1,578,198	1,578,198	\$ 1,578,198
61. Internet domain names and websites	\$		\$
62. Licenses, franchises, and royalties	\$		\$
63. Customer lists, mailing lists, or other compilations	\$ 1,578,198	1,578,198	\$ 1,578,198
64. Other intangibles, or intellectual property	\$ 1,578,198	1,578,198	\$ 1,579,198
65. Goodwill	\$ 1,578,198	1,578,198	\$ 1,578,198

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$ 6,312,792

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67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

☒ No☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

☐ No☒ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

☒ No☐ Yes**Part 11: All other assets**

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☐ No. Go to Part 12.☐ Yes. Fill in the information below.Current value of
debtor's interest

71. Notes receivable

Description (include name of obligor)

Total face amount

doubtful or uncollectible amount

\$

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

Federal NOL Asset

Tax year 2023

\$ 1,165,000

Retained Earnings NOL

Tax year 2023

\$ 16,935,750

Tax year

\$

73. Interests in insurance policies or annuities

\$

74. Causes of action against third parties (whether or not a lawsuit has been filed)

\$

Nature of claim

Amount requested

\$

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

\$

Nature of claim

Amount requested

\$

76. Trusts, equitable or future interests in property

\$

77. Other property of any kind not already listed Examples: Season tickets, country club membership

\$

\$

78. Total of Part 11.

Add lines 74 through 77. Copy the total to line 90.

\$ 18,100,750

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

☒ No☐ Yes

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Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1.	\$ 26,100	
81. Deposits and prepayments. Copy line 9, Part 2.	\$ 5,450	
82. Accounts receivable. Copy line 12, Part 3.	\$ 170,881	
83. Investments. Copy line 17, Part 4.	\$ 0	
84. Inventory. Copy line 23, Part 5.	\$ 1,107,222	
85. Farming and fishing-related assets. Copy line 33, Part 6.	\$	
86. Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7.	\$ 18,167	
87. Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$ 1,740,826	
88. Real property. Copy line 56, Part 9. →		\$ 100,000
89. Intangibles and intellectual property. Copy line 66, Part 10.	\$ 6,312,794	
90. All other assets. Copy line 78, Part 11.	+ \$ 18,100,750	
91. Total. Add lines 80 through 90 for each column. 91a.	\$ 27,482,187	+ 91b. \$ 100,000
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.		\$ 27,582,187

Fill in this information to identify the case:

Debtor name Cell-nique Corporation
 United States Bankruptcy Court for the: _____ District of _____
 (State)
 Case number (if known): _____

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A Amount of claim (Do not deduct the value of collateral)	Column B Value of collateral that supports this claim
--	--

21 Creditor's name <u>Berkshire Bank</u> Creditor's mailing address _____ Creditor's email address, if known _____ Date debt was incurred <u>2018</u> Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Specify each creditor, including this creditor, and its relative priority: _____	Describe debtor's property that is subject to a lien <u>Senior Secured on All Assets</u> Describe the lien <u>UCC1</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 2,100,000 \$ 27,582,187
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TD Bank Senior Secured on All Assets

DANCING DEER BANKING ON SPECIFIC ASSETS

22 Creditor's name <u>TD Bank</u> Creditor's mailing address _____ Creditor's email address, if known _____ Date debt was incurred <u>2018</u> Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority: _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien <u>Senior Secured on All Assets</u> Describe the lien <u>UCC1</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 110,000 \$ 27,582,187
--	--	-----------------------------

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$22,100,000

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Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value of collateral

Column B

Value of collateral that supports this claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2. Creditor's name <u>NYBDC (Pursuit SBA)</u>	Describe debtor's property that is subject to a lien <u>Subordinated on All Assets</u>		<u>\$ 4,500,000</u>	<u>\$ 27,582,187</u>
Creditor's mailing address _____ _____				
Creditor's email address, if known _____	Describe the lien <u>UCC1 + 1st Mortgage on affiliates assets</u>			
Date debt was incurred <u>2016</u>	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Last 4 digits of account number _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).			
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			

2. Creditor's name <u>Reiser</u>	Describe debtor's property that is subject to a lien <u>Equipment</u>		<u>\$ 100,000</u>	<u>\$ 100,000</u>
Creditor's mailing address _____ _____				
Creditor's email address, if known _____	Describe the lien <u>UCC1</u>			
Date debt was incurred <u>2019</u>	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Last 4 digits of account number _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).			
Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			

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Part 1: Additional Page

Column A
Amount of claim
Do not deduct the value
of collateral

Column B
Value of collateral
that supports this
claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

4 Creditor's name Fernwood Hitachi Lease Describe debtor's property that is subject to a lien Specific Equipment \$ 14,000 \$ 14,000

Creditor's mailing address _____

Creditor's email address, if known _____

Date debt was incurred: 2019 Describe the lien UCC1

Last 4 digits of account number _____ Is the creditor an insider or related party?
☒ No
☐ Yes

Do multiple creditors have an interest in the same property?
☒ No
☐ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

☐ Yes. The relative priority of creditors is specified on lines _____

Is anyone else liable on this claim?
☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:
Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

5 Creditor's name Pawnee Describe debtor's property that is subject to a lien Equipment \$ 100,000 \$ 100,000

Creditor's mailing address _____

Creditor's email address, if known _____

Date debt was incurred: 2019 Describe the lien UCC1

Last 4 digits of account number _____ Is the creditor an insider or related party?
☒ No
☐ Yes

Do multiple creditors have an interest in the same property?
☒ No
☐ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

☐ Yes. The relative priority of creditors is specified on lines _____

Is anyone else liable on this claim?
☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:
Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

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Column A	Column B
Amount of claim	Value of collateral that supports this claim
Do not deduct the value of collateral	

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

6 Creditor's name Citizens Bank (CIT) Describe debtor's property that is subject to a lien Specific Equipment \$ 4,500 \$ 45,000

Creditor's mailing address _____

Creditor's email address, if known _____

Date debt was incurred 2019 Describe the lien UCC1

Last 4 digits of account number _____ Is the creditor an insider or related party?

☒ No
☐ Yes

Do multiple creditors have an interest in the same property?
☒ No
☐ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

☐ Yes. The relative priority of creditors is specified on lines _____

Is anyone else liable on this claim?
☒ No
☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H).

As of the petition filing date, the claim is:
Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

7 Creditor's name Dancing Deer Baking Co, LLC Describe debtor's property that is subject to a lien All Assets of DDBC \$ 5,000,000 \$ 100,000

Creditor's mailing address _____

Creditor's email address, if known _____

Date debt was incurred 2018 Describe the lien UCC1

Last 4 digits of account number _____ Is the creditor an insider or related party?

☒ No
☐ Yes

Do multiple creditors have an interest in the same property?
☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.
Berkshire Bank

☐ Yes. The relative priority of creditors is specified on lines _____

Is anyone else liable on this claim?
☐ No
☒ Yes. Fill out Schedule H: Codebtors (Official Form 206H).

As of the petition filing date, the claim is:
Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

Debtor

Name

Case number (if known)

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value of collateral

Column B

Value of collateral that supports this claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

8 Creditor's name Describe debtor's property that is subject to a lien

HM Fox, LLC

All Assets of Hodgson Mill

\$ 4,500,000

\$ 100,000

Creditor's mailing address

Describe the lien

UCC1

Creditor's email address, if known

Is the creditor an insider or related party?

☒ No
☐ Yes

Date debt was incurred: 2019

Is anyone else liable on this claim?

☒ No
☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H).

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

As of the petition filing date, the claim is:
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

☒ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

Berkshire Bank

☐ Yes. The relative priority of creditors is specified on lines

Creditor's name

Describe debtor's property that is subject to a lien

Creditor's mailing address

Describe the lien

UCC1

Creditor's email address, if known

Is the creditor an insider or related party?

☐ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

☐ No
☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H).

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

As of the petition filing date, the claim is:
Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

☐ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

☐ Yes. The relative priority of creditors is specified on lines

Name:

Case number (if known)

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies; assignees of claims listed above; and attorneys for secured creditors.

[illegible]

Fill in this information to identify the case:

Debtor: Cell-nique CorporationUnited States Bankruptcy Court for the: _____ District of _____
(State)Case number _____
(If known)

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☐ Check if this is an amended filing.

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

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Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1 List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

2.1 Priority creditor's name and mailing address

IRS 2013-433D

Date or dates debt was incurred

2013

Last 4 digits of account number: _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)

As of the petition filing date, the claim is:

Total claim: \$ 49,100Priority amount: \$ 49,100

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset?

- ☒ No
☐ Yes

2.2 Priority creditor's name and mailing address

IRS 941

Date or dates debt was incurred

July 2023, Aug 2023

Last 4 digits of account number: _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)

As of the petition filing date, the claim is:

\$ 82,809.30\$ 82,809.30

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset?

- ☐ No
☐ Yes

2.3 Priority creditor's name and mailing address

Date or dates debt was incurred

Last 4 digits of account number: _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)

As of the petition filing date, the claim is: \$ _____

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset?

- ☐ No
☐ Yes

Part 2 List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	<p>Nonpriority creditor's name and mailing address <u>Robert Ohare c/o Dancing Deer Baking Co, LLC</u> <u>20 Vesey St</u> <u>New York NY 10007</u></p> <p>Date or dates debt was incurred <u>2018</u> Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: \$ <u>5,000,000</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.2	<p>Nonpriority creditor's name and mailing address <u>Argosy Credit c/o HM Fox, LP</u> <u>950 W Valley Rd, Suite 2900</u> <u>Wayne PA 19087</u></p> <p>Date or dates debt was incurred <u>2018</u> Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: \$ <u>4,557,976</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Delaware Case 1:20-cv-01073-RGA Hodgson Mill Corporation v. Hodgson Mill, Inc.</u></p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.3	<p>Nonpriority creditor's name and mailing address <u>Fedex-C/O Marinstein & Marinstein, Esqs., PLLC</u> <u>22 First Street</u> <u>Troy NY 12181-0155</u></p> <p>Date or dates debt was incurred <u>2018</u> Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: \$ <u>598,860.55</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Liability Purchased from Dancing Deer Baking Co See above</u></p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>
3.4	<p>Nonpriority creditor's name and mailing address <u>Taylor McCaffrey, LLP c/o Parkland Industrial Hemp Growers</u> <u>2200-201 Portage Ave</u> <u>Winnipeg JMB 3R3B 3L3</u></p> <p>Date or dates debt was incurred <u>2018</u> Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: \$ <u>440,000</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.5	<p>Nonpriority creditor's name and mailing address <u>CFG Merchant Solutions, LLC</u> <u>180 Malden Ln, 15th Floor</u> <u>New York NY 10038</u></p> <p>Date or dates debt was incurred <u>2023</u> Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: \$ <u>144,000</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.6	<p>Nonpriority creditor's name and mailing address <u>Capital Assist</u> _____ _____</p> <p>Date or dates debt was incurred <u>2023</u> Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: \$ <u>100,000</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<p>3.7 Nonpriority creditor's name and mailing address</p> <p><u>US Flour</u></p> <p><u>1 Huntington Quadrangle</u></p> <p><u>Melville NY 11747</u></p> <p>Date or dates debt was incurred <u>2022</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> Liquidated and neither contingent nor disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$ <u>95,126.98</u></p>
<p>3.8 Nonpriority creditor's name and mailing address</p> <p><u>ArcBest</u></p> <p><u>49 Green Mountain Drive</u></p> <p><u>Cohoes NY 12047-4807</u></p> <p>Date or dates debt was incurred <u>2022</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$ <u>83,757.37</u></p>
<p>3.9 Nonpriority creditor's name and mailing address</p> <p><u>Shopify Capital</u></p> <p><u>100 Shockoe Slip, 2nd Floor,</u></p> <p><u>Richmond VA 23219</u></p> <p>Date or dates debt was incurred <u>2023</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$ <u>76,000</u></p>
<p>3.10 Nonpriority creditor's name and mailing address</p> <p><u>Keystone Paper and Box Company</u></p> <p><u>31 Edwin Road</u></p> <p><u>South Windsor CT 06074</u></p> <p>Date or dates debt was incurred <u>2023</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$ <u>72,382.20</u></p>
<p>3.11 Nonpriority creditor's name and mailing address</p> <p><u>Parkside Funding Group, LLC</u></p> <p>Date or dates debt was incurred <u>2023</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$ <u>70,000.00</u></p>

Part 2

Amount of claim

3.14

Part 2 Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

		Amount of claim
317	<p>Nonpriority creditor's name and mailing address</p> <p>Firmenich Incorporated</p> <p>411 East Gano</p> <p>Saint Louis MO 63147</p> <p>Date or dates debt was incurred 2022</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> Liquidated and neither contingent nor disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>\$ 43,256.25</p>
317	<p>Nonpriority creditor's name and mailing address</p> <p>Five Star Packaging</p> <p>175 Classon Ave</p> <p>Brooklyn NY 11205</p> <p>Date or dates debt was incurred 2022</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>\$ 42,655.40</p>
318	<p>Nonpriority creditor's name and mailing address</p> <p>American International</p> <p>8066 Fulton St E</p> <p>Ada MI 49301</p> <p>Date or dates debt was incurred 2023</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>\$ 41,672.19</p>
319	<p>Nonpriority creditor's name and mailing address</p> <p>New York Power Authority</p> <p>123 Main St</p> <p>White Plains NY 10601</p> <p>Date or dates debt was incurred 2012</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>\$ 40,962.11</p>
320	<p>Nonpriority creditor's name and mailing address</p> <p>Meyers Saxon c/o International Paper file 271369</p> <p>3620 Quentin Rd</p> <p>Brooklyn NY 11234</p> <p>Date or dates debt was incurred 2023</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>\$ 40,350.71</p>

Part 2 Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

321	Nonpriority creditor's name and mailing address Kirk Cypel c/o AMI 4371 Northlake Blvd Palm Beach Gardens FL 33418 Date or dates debt was incurred 2022 Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 35,349.78
322	Nonpriority creditor's name and mailing address Northern Oilseed Mills Box 126 Rossendale MB R0H 1C0 Date or dates debt was incurred 2022 Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 32,135.25
323	Nonpriority creditor's name and mailing address Parlor City Paper Box PO BOX 756 Binghamton NY 13902 Date or dates debt was incurred 2022 Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 27,796.82
324	Nonpriority creditor's name and mailing address Quad Packaging N61W23044 Harry's Way Sussex WI 53089 Date or dates debt was incurred 2022 Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 24,478.80
325	Nonpriority creditor's name and mailing address Wholesome Sweeteners, Inc. 1 Sugar Creek Center Blvd Sugar Land TX 77478 Date or dates debt was incurred 2022 Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 24,000

Debtor

Cell-nique Corporation

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Part 2 Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

326	Nonpriority creditor's name and mailing address Merrill Industries 26 Village St Ellington CT 06029 Date or dates debt was incurred 2018 Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 23,486.2
327	Nonpriority creditor's name and mailing address Budenheim USA, Inc. 889 West Longview Avenue Mansfield OH 44906 Date or dates debt was incurred 2022 Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 22,583.5
328	Nonpriority creditor's name and mailing address Christopher Raimondi c/o Source One Packaging L.P. 553 Broadway Massapequa NY 11758 Date or dates debt was incurred 2022 Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 22,147.33
329	Nonpriority creditor's name and mailing address Blue Dot Americas Limited 43 Church St St Catharines ON L2R 7E1 Date or dates debt was incurred 2022 Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 21,900
330	Nonpriority creditor's name and mailing address Feng Ying HK Company LTD 501 Huayuan Community Shandong China Date or dates debt was incurred 2022 Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 19,300

Part 2 Additional Page

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Amount of claim

331	<p>Nonpriority creditor's name and mailing address <u>Starlite Services, Inc.</u> <u>1165 West Crossroads Prky</u> <u>Romeoville IL 60446</u></p> <p>Date or dates debt was incurred <u>2022</u> Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$ <u>17,919</u></p>
332	<p>Nonpriority creditor's name and mailing address <u>Stik-Pak Solutions, Inc.</u> <u>60 Commerce Road</u> <u>Rocky Mount VA 24151</u></p> <p>Date or dates debt was incurred <u>2021</u> Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$ <u>17,730.75</u></p>
333	<p>Nonpriority creditor's name and mailing address <u>North Central C/O Altus</u> <u>PO Box 1389</u> <u>Kenner LA 70063</u></p> <p>Date or dates debt was incurred <u>2022</u> Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$ <u>13,300</u></p>
334	<p>Nonpriority creditor's name and mailing address <u>Unicorr Packaging Group</u> <u>300 Cedar Hill Street</u> <u>Marlborough MA 01752</u></p> <p>Date or dates debt was incurred <u>2022</u> Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$ <u>11,517.53</u></p>
335	<p>Nonpriority creditor's name and mailing address <u>Dan Beyers</u> <u>31 N. 1600 East Road</u> <u>Rosamond IL 62083</u></p> <p>Date or dates debt was incurred <u>2019</u> Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$ <u>10,781</u></p>

Debtor

Cell-nique Corporation
Name

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Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

336 Nonpriority creditor's name and mailing address

Braden Packaging Supply

7856 State Rte 5

Clinton NY 13323

Date or dates debt was incurred

2023

Last 4 digits of account number

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ Liquidated and neither contingent nor disputed

Basis for the claim:

Is the claim subject to offset?

- ☐ No
☐ Yes

\$ 13,640

337 Nonpriority creditor's name and mailing address

Ecom Ingredients

6 Penns Trail Suite 215

Newtown PA 18940

Date or dates debt was incurred

2021

Last 4 digits of account number

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Is the claim subject to offset?

- ☐ No
☐ Yes

\$ 10,005

338 Nonpriority creditor's name and mailing address

Barry Callebaut USA LLC

4863 Hanoverville Road

Bethlehem PA 18020

Date or dates debt was incurred

2022

Last 4 digits of account number

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Is the claim subject to offset?

- ☐ No
☐ Yes

\$ 9,730

339 Nonpriority creditor's name and mailing address

Hillcrest Foods, Inc.

217 Edie Rd

Saratoga Springs NY 12866

Date or dates debt was incurred

2022

Last 4 digits of account number

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Is the claim subject to offset?

- ☐ No
☐ Yes

\$ 7,741

340 Nonpriority creditor's name and mailing address

UNITED BAGS

1355 N Warson Rd

St Louis MO 63132

Date or dates debt was incurred

2023

Last 4 digits of account number

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Is the claim subject to offset?

- ☐ No
☐ Yes

\$ 7,238

Debtor

Cell-nique Corporation

Document

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Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

341 Nonpriority creditor's name and mailing address

Stoltzfus Trucking Brokerage Inc

30 Slaymaker Hill Road

Kinzers PA 17535

Date or dates debt was incurred

2022

Last 4 digits of account number

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ Liquidated and neither contingent nor disputed

Basis for the claim:

Is the claim subject to offset?

- ☐ No
☐ Yes

\$ 6,093

342 Nonpriority creditor's name and mailing address

Pure Functional Foods Inc

267 Route 89 South

Savannah NY 13146

Date or dates debt was incurred

2023

Last 4 digits of account number

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Is the claim subject to offset?

- ☐ No
☐ Yes

\$ 6,053

343 Nonpriority creditor's name and mailing address

Emmons Metro LLC

453 N Peral St

Menands NY 12204

Date or dates debt was incurred

2022

Last 4 digits of account number

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Is the claim subject to offset?

- ☐ No
☐ Yes

\$ 6,024

344 Nonpriority creditor's name and mailing address

ADM Milling Co

250 Ganson St

Buffalo NY 14203

Date or dates debt was incurred

2022

Last 4 digits of account number

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Is the claim subject to offset?

- ☐ No
☐ Yes

\$ 5,905

345 Nonpriority creditor's name and mailing address

NFC Packaging INC

170 Water Street North

Cambridge ON M1R 5G8

Date or dates debt was incurred

2022

Last 4 digits of account number

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Is the claim subject to offset?

- ☐ No
☐ Yes

\$ 5,824

Part 2 Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

346	Nonpriority creditor's name and mailing address Flavor Producers 28350 Witherspoon Parkway Valencia CA 91355 Date or dates debt was incurred 2022 Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 5,689
347	Nonpriority creditor's name and mailing address DRP FLEXPACK LLC 716 Broad Street EXT Waterford CT 06385 Date or dates debt was incurred 2023 Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 4,462
348	Nonpriority creditor's name and mailing address Cristo Demolition, Inc. 241 N Peral St Albany NY 12207 Date or dates debt was incurred 2022 Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 4,006
349	Nonpriority creditor's name and mailing address St. Charles Trading 98 Executive Avenue Edison NJ 08817 Date or dates debt was incurred 2022 Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 3,645
350	Nonpriority creditor's name and mailing address The Leavitt Corporation 100 Santilli Highway Everett MA 02149 Date or dates debt was incurred 2022 Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 3,634

Part 2 Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

351 Nonpriority creditor's name and mailing address
Pines International

1992 East 1400 Road
Lawrence KS 66044

Date or dates debt was incurred 2022
Last 4 digits of account number

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ Liquidated and neither contingent nor disputed

Basis for the claim:

Is the claim subject to offset?

- ☐ No
☐ Yes

\$ 3,420

352 Nonpriority creditor's name and mailing address
Nitco LLC

P.O. Box 22241
New York NY 10087-2241

Date or dates debt was incurred 2023
Last 4 digits of account number

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Is the claim subject to offset?

- ☐ No
☐ Yes

\$ 3,338

353 Nonpriority creditor's name and mailing address
Van Drunen Farms

300 West 6th Street
Mokenca IL 60954

Date or dates debt was incurred 2022
Last 4 digits of account number

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Is the claim subject to offset?

- ☐ No
☐ Yes

\$ 3,320

354 Nonpriority creditor's name and mailing address
Distribution 2000, Inc.

1165 West Crossroads Prky
Romeoville IL 60446

Date or dates debt was incurred 2022
Last 4 digits of account number

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Is the claim subject to offset?

- ☐ No
☐ Yes

\$ 2,612

355 Nonpriority creditor's name and mailing address
Draco Natural Products

539 Parrott Street
San Jose CA 95112

Date or dates debt was incurred 2022
Last 4 digits of account number

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Is the claim subject to offset?

- ☐ No
☐ Yes

\$ 2,540

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

356 Nonpriority creditor's name and mailing address
Double Q Pecans

10440 Hwy 341 South
Fort Valley GA 3130

Date or dates debt was incurred 2022
Last 4 digits of account number

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ Liquidated and neither contingent nor disputed

Basis for the claim:

Is the claim subject to offset?

- ☐ No
☐ Yes

\$ 2,242

357 Nonpriority creditor's name and mailing address

KDM FOODSALES

PO BOX 63
DOWNTOWN PA 19335

Date or dates debt was incurred 2022
Last 4 digits of account number

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Is the claim subject to offset?

- ☐ No
☐ Yes

\$ 2,010

358 Nonpriority creditor's name and mailing address

Champlain Valley Milling

19 Myers Way
Willsboro NY 12996

Date or dates debt was incurred 2022
Last 4 digits of account number

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Is the claim subject to offset?

- ☐ No
☐ Yes

\$ 1,910

359 Nonpriority creditor's name and mailing address

Amherst Label

15 Westchester Drive

Milford NH 03055

Date or dates debt was incurred 2022
Last 4 digits of account number

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Is the claim subject to offset?

- ☐ No
☐ Yes

\$ 1,865

360 Nonpriority creditor's name and mailing address

Livingston International, Inc.

P.O. Box 7410166

Chicago IL 60674-0166

Date or dates debt was incurred 2022
Last 4 digits of account number

As of the petition filing date, the claim is:
Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Is the claim subject to offset?

- ☐ No
☐ Yes

\$ 1,810

Debtor

Cell-nique Corporation

Document

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Part 2 Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

361 Nonpriority creditor's name and mailing address

MAYER BROS

230 South LaSalle St

Chicago, IL 60604-1404

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ Liquidated and neither contingent nor disputed

Basis for the claim:

Date or dates debt was incurred

2022

Last 4 digits of account number

Is the claim subject to offset?

- ☐ No
☐ Yes

\$ 1,796

362 Nonpriority creditor's name and mailing address

Alliant Food Safety Labs

1810 New Britain Avenue

Farmington CT 6032

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Date or dates debt was incurred

2022

Last 4 digits of account number

Is the claim subject to offset?

- ☐ No
☐ Yes

\$ 1,429

363 Nonpriority creditor's name and mailing address

Dan Ratner

22 Hamilton Way

Castleton NY 12033

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Date or dates debt was incurred

2022

Last 4 digits of account number

Is the claim subject to offset?

- ☐ No
☐ Yes

\$ 1,274

364 Nonpriority creditor's name and mailing address

Universal EDI Corporation

122 Fifteenth Street #635

San Diego CA 92130

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Date or dates debt was incurred

2022

Last 4 digits of account number

Is the claim subject to offset?

- ☐ No
☐ Yes

\$ 1,158

365 Nonpriority creditor's name and mailing address

All-Fill, Inc.

418 Creamery Way

Exton PA 19341

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Date or dates debt was incurred

2022

Last 4 digits of account number

Is the claim subject to offset?

- ☐ No
☐ Yes

\$ 956

Debtor

Name

Cell-nique Corporation

Document

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Case number (if known)

Part 2 Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.66	Nonpriority creditor's name and mailing address Capital Region Environmental Laboratory 137 Columbia Turnpike Rensselaer NY 12144 Date or dates debt was incurred 2022 Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 920
3.67	Nonpriority creditor's name and mailing address Walter S. Pratt & Sons, Inc. PO Box 170 Rensselaer NY 12144 Date or dates debt was incurred 2022 Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 826
3.68	Nonpriority creditor's name and mailing address Albany Fire Extinguisher P.O. Box 429 Watervliet NY 12189 Date or dates debt was incurred 2022 Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 790
3.69	Nonpriority creditor's name and mailing address Good Year Tire & Rubber 999 US Route 9 Castleton On Hudson NY 12033 Date or dates debt was incurred 2022 Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 787
3.70	Nonpriority creditor's name and mailing address Haun Welding Supply Inc 564 Broadway Albany NY 12204 Date or dates debt was incurred 2022 Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 448

Fill in this information to identify the case:

Debtor name Cell-nique Corporation
 United States Bankruptcy Court for the _____ District of _____ (State)
 Case number (if known): _____ Chapter _____

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1 State what the contract or lease is for and the nature of the debtor's interest Pawnee
Specific Equipment
 State the term remaining Maturity 4/15/2025
 List the contract number of any government contract _____

2.2 State what the contract or lease is for and the nature of the debtor's interest Fernwood Hitachi
Specific Equipment
 State the term remaining Maturity 4/25/2026
 List the contract number of any government contract _____

2.3 State what the contract or lease is for and the nature of the debtor's interest Reiser
Specific Equipment
 State the term remaining Maturity 6/15/2024
 List the contract number of any government contract _____

2.4 State what the contract or lease is for and the nature of the debtor's interest Physicians Capitol Corp
Mgmt Contract
 State the term remaining _____
 List the contract number of any government contract _____

2.5 State what the contract or lease is for and the nature of the debtor's interest PCC Castleton Corp
Real Estate Rental
 State the term remaining 12/31/2027
 List the contract number of any government contract _____

Fill in this information to identify the case:

Debtor name Cell-nique CorporationUnited States Bankruptcy Court for the: _____ District of _____
(State)

Case number (If known): _____

☐ Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor		Column 2: Creditor	Check all schedules that apply
Name	Mailing address	Name	
2.1 <u>Dancing Deer Corp</u>	<u>22 Hamilton Way</u> Street <u>Castleton</u> <u>NY</u> <u>12033</u> City State ZIP Code	<u>Berkshire Bank</u> <u>Dancing Deer Baking Co, LLC</u>	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2 <u>Hodgson Mills Corp</u>	<u>Same as Above</u> Street City State ZIP Code	<u>Berkshire Bank</u> <u>HM Fox, LLC</u>	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3 <u>Cell-nique Corporation</u>	<u>Same as Above</u> Street City State ZIP Code	<u>Berkshire Bank</u> <u>NYBDC Pursuit SBA</u> <u>TD Bank</u> <u>DDBC</u> <u>HM Fox</u> <u>190 Fountain St</u>	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4 <u>PCC Castleton Corp</u>	<u>Same as Above</u> Street City State ZIP Code	<u>NYBDC/Pursuit/SBA</u> <u>Berkshire Bank</u>	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.5 <u>Physicians Capitol Corp</u>	<u>Same as Above</u> Street City State ZIP Code	<u>NYBDC/Pursuit/SBA</u> <u>Berkshire Bank</u>	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.6 <u>Living Harvest, Inc</u>	<u>Same as Above</u> Street City State ZIP Code	<u>NYBDC/Pursuit/SBA</u> <u>Berkshire Bank</u>	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Debtor

Cell-nique Corporation

Document

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Case number (if known)

Additional Page If Debtor Has More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Debtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply
2. <u>7</u> Hudson River Foods Corporation	Same as above Street _____ _____ City _____ State _____ ZIP Code _____	NYBDC/Pursult/SBA Berkshire Bank	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2. _____	Street _____ _____ City _____ State _____ ZIP Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2. _____	Street _____ _____ City _____ State _____ ZIP Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2. _____	Street _____ _____ City _____ State _____ ZIP Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2. _____	Street _____ _____ City _____ State _____ ZIP Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2. _____	Street _____ _____ City _____ State _____ ZIP Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2. _____	Street _____ _____ City _____ State _____ ZIP Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2. _____	Street _____ _____ City _____ State _____ ZIP Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Fill in this information to identify the case:

Debtor name Cell-nique Corporation

United States Bankruptcy Court for the: _____ District of _____
(State)

Case number (if known): _____

☐ Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1 Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. **Real property:**

Copy line 88 from *Schedule A/B* \$ 100,000

1b. **Total personal property:**

Copy line 91A from *Schedule A/B* \$ 27,482,187

1c. **Total of all property:**

Copy line 92 from *Schedule A/B* \$ 27,582,187

Part 2 Summary of Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D* \$ 6,793,743

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. **Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 5a of *Schedule E/F* \$ 132,000

3b. **Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F* + \$ 12,242,644

4. **Total liabilities**.....

Lines 2 + 3a + 3b \$ 19,168,386